

AFFIDAVIT OF RELATIVE OF DECEASED VOTER

I, \_\_\_\_\_, do hereby swear that  
(name of relative)

\_\_\_\_\_ a registered voter in this county is deceased.  
(name of deceased voter)

My relation to the voter is \_\_\_\_\_.

\_\_\_\_\_  
Signature

Sworn to and subscribed before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Officer Administering Oath

\_\_\_\_\_  
Title of Officer Administering Oath